

PTO/SB/22 (08-03)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 21900-00034-US						
<p>In re Application of Hideyuki Kano</p> <table border="1"> <tr> <td>Application Number 09/914,449-Conf. #4179</td> <td>Filed August 28, 2001</td> </tr> <tr> <td>For BEDSORE PREVENTING METHOD, BEDSORE PREVENTING SHEET, BEDSORE PREVENTING CLOTH, BEDSORE PREVENTING MATTRESS, BEDSORE PREVENTING BED, BEDSORE PREVENTING CLOTH, BEDSORE PREVENTING MATTRESS, BEDSORE PREVENTING BED,</td> <td></td> </tr> <tr> <td>Art Unit 1771</td> <td>Examiner L. Torres-Velazquez</td> </tr> </table>			Application Number 09/914,449-Conf. #4179	Filed August 28, 2001	For BEDSORE PREVENTING METHOD, BEDSORE PREVENTING SHEET, BEDSORE PREVENTING CLOTH, BEDSORE PREVENTING MATTRESS, BEDSORE PREVENTING BED, BEDSORE PREVENTING CLOTH, BEDSORE PREVENTING MATTRESS, BEDSORE PREVENTING BED,		Art Unit 1771	Examiner L. Torres-Velazquez
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Art Unit 1771	Examiner L. Torres-Velazquez							

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- | | |
|--|-----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ _____ |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ _____ |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ 950.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ _____ |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____ | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 22-0185 | |

I have enclosed a duplicate copy of this sheet.

- I am the applicant/inventor.
 assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
 attorney or agent of record. Registration Number _____
 attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) 24,510

July 28, 2004

Date

(202) 331-7111

Telephone Number



Signature

Morris Liss

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

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